

BEST AVAILABLE COPY

| POSITION            | INITIALS  | ID NO. | DATE    |
|---------------------|-----------|--------|---------|
| FEE DETERMINATION   | <i>MT</i> | 67810  | 6/9/55  |
| O.I.P.E. CLASSIFIER |           |        | 6-14-99 |
| FORMALITY REVIEW    | J.S.      | 69134  | 6-21-99 |

INDEX OF CLAIMS

2 ..... Rejected  
 1 ..... Allowed  
 (Through numeral) ..... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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